



# APPLICATION FOR A CREDIT ACCOUNT

**PREMIER LASERTUBE a division of BROWN & TAWSE STEELSTOCK LTD**

PO Box 2, Anstey Mill Lane, ALTON, Hants, GU34 2YA  
(please complete this form in block capitals or typeset)

Tel: 01420 544410

Fax: 01420 542495

Full Trading name : \_\_\_\_\_

Full address \_\_\_\_\_

Post code \_\_\_\_\_

Email \_\_\_\_\_ Tel No \_\_\_\_\_ Fax.No \_\_\_\_\_ Contact for A/Cs \_\_\_\_\_

Invoicing address if different \_\_\_\_\_

Post code \_\_\_\_\_

Date established  Annual turnover  No. of employees

If subsidiary, please state name of Parent \_\_\_\_\_ Name of ultimate Parent \_\_\_\_\_

If not Ltd. name and address of principal partners \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Please note : It is advantageous to enclose any accounting information when making an application for a new account as this greatly increases the processing speed, especially in the case of new and non- limited companies

Bank Name \_\_\_\_\_ Address \_\_\_\_\_

Address (contd) \_\_\_\_\_

Post Code \_\_\_\_\_ Sort Code \_\_\_\_\_ Tel No \_\_\_\_\_

Sales Rep Code :	SIC Code :
<i>To be completed by sales executive</i>	

Main/Sub contractor (delete as applicable) \_\_\_\_\_ Name of client \_\_\_\_\_

### Supplier Referees (should be in a position to comment on a credit facility)

1) Full name \_\_\_\_\_ Address \_\_\_\_\_

Address(contd) \_\_\_\_\_

Post code \_\_\_\_\_ Tel No. \_\_\_\_\_ Fax No. \_\_\_\_\_ Contact \_\_\_\_\_

Value of monthly business \_\_\_\_\_ How long open ? \_\_\_\_\_

2) Full name \_\_\_\_\_ Address \_\_\_\_\_

Address(contd) \_\_\_\_\_

Post code \_\_\_\_\_ Tel No. \_\_\_\_\_ Fax. No. \_\_\_\_\_ Contact \_\_\_\_\_

Value of monthly business \_\_\_\_\_ How long open ? \_\_\_\_\_

Credit Limit required £ \_\_\_\_\_ maximum

**Settlement of account is strictly Net and payable within 60 days of the end of the month of invoice**

### Delivery / unloading at Customers premises

Customers are responsible for the timely and safe unloading of goods at their premises, using mechanical handling equipment designed for the purpose. Premier Lasertube personnel and/or their sub-contractors will assist in the safe unloading of goods, but will not assist by "barring-off" nor by using methods for which they have not been trained or which they believe to be unsafe. Please specify the normal method of unloading at your premises (delete as applicable): overhead crane / mobile crane / fork lift truck / side-loader / manual

What is the maximum bundle weight which can be safely lifted \_\_\_\_\_ tonnes

Can articulated vehicles be safely unloaded at your premises: YES / NO. If NO please supply details \_\_\_\_\_

Are there any access problems at your premises \_\_\_\_\_

Do you have any particular unloading requirements and/or practices: YES / NO. If YES please supply details \_\_\_\_\_

### General

I/We undertake to adhere to the Conditions of Sale shown overleaf/attached and to settle my/our account within your terms of payment as described above. I/We understand and accept that Premier Lasertube and/or Brown & Tawse Steelstock Ltd will make a search with a credit reference agency, which will keep a record of that search and will share that information with other businesses. Premier Lasertube and/or Brown & Tawse Steelstock Ltd may also make enquiries about the principal directors or partners with a credit reference agency.

Signature : \_\_\_\_\_ Position : \_\_\_\_\_ Date : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please attach a sample of company/business letterhead to this application